



# City of Rocklin

3970 Rocklin Road  
 Rocklin, California 95677  
 Phone: (916) 625-5000  
 www.rocklin.ca.us

## BUSINESS LICENSE APPLICATION

<b>NAME OF BUSINESS / DBA:</b>			<b>BUSINESS PHONE:</b>		
<b>BUSINESS STREET LOCATION:</b>	<b>SUITE#:</b>	<b>CITY / STATE:</b>		<b>ZIP CODE:</b>	
<b>MAILING STREET ADDRESS (IF DIFFERENT):</b>	<b>SUITE#:</b>	<b>CITY / STATE:</b>		<b>ZIP CODE:</b>	
<b>COMPANY WEBSITE ADDRESS (IF APPLICABLE):</b>					
<b>DESCRIBE PROPOSED USE (IN DETAIL)</b>					
<input type="checkbox"/> <b>SOLE PROPRIETORSHIP</b>		<input type="checkbox"/> <b>PARTNERSHIP</b> <input type="checkbox"/> <b>CORPORATION</b> <input type="checkbox"/> <b>LIMITED LIABILITY CORPORATION</b>			
<b>BUSINESS OWNER'S NAME:</b>		<b>NAMES OF PARTNERS OR OFFICERS:</b>			

**NOTE: THE INFORMATION ABOVE THIS LINE WILL BE MADE PUBLIC UPON REQUEST.**

<b>BUSINESS OWNER / PARTNER / OFFICER NAME:</b>				<b>EMAIL ADDRESS:</b>	
<b>HOME STREET ADDRESS:</b>		<b>CITY / STATE:</b>		<b>ZIP CODE:</b>	<b>PHONE:</b>
<b>SOCIAL SECURITY #:</b>		<b>FEDERAL EMPLOYER ID #:</b>		<b>STATE EMPLOYER ID #:</b>	<b>STATE BOARD OF EQUALIZATION #:</b>
<b>NUMBER OF FULL TIME EMPLOYEES:</b>	<b>STATE CONTRACTOR'S LICENSE #:</b>		<b>EXPIRATION DATE:</b>		<b>CLASS:</b>
<b>OTHER KEY MANAGERS NAME/TITLE:</b>			<b>EMAIL ADDRESS:</b>		
<p>I acknowledge and understand that the Business License Certificate issued by the City of Rocklin is a receipt evidencing that I have paid the City of Rocklin business license tax imposed under Chapter 5.04 of the Rocklin Municipal Code for the year indicated. Issuance of the certificate does not entitle me to carry on the business without complying with all other City building and zoning ordinances and all other applicable laws. I take full and sole responsibility for determining that the business location stated above has the proper zoning and is in the appropriate type of structure, and for securing all necessary approvals prior to commencement of business at this location.</p> <p>I certify that the above information above is true and correct.</p>					
<b>SIGNATURE:</b>			<b>TITLE:</b>		<b>DATE:</b>



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## WORKER'S COMPENSATION DECLARATION

### **CERTIFICATION OF WORKERS' COMPENSATION COMPLIANCE**

**NOTE:** EVERY BUSINESS APPLYING FOR A BUSINESS LICENSE FROM THE CITY OF ROCKLIN MUST PROVIDE PROOF OF VALID WORKERS' COMPENSATION INSURANCE OR OTHER PROOF OF COMPLIANCE WITH THE PROVISIONS OF SECTION 3700 OF THE CALIFORNIA LABOR CODE.

**I hereby affirm under penalty of perjury one of the following declarations:**

- ☐ I have and will maintain workers' compensation insurance, as required by Section 3700 of the California Labor Code, for the performance of the work for which this license is issued. Proof of workers' compensation coverage is attached.
- ☐ I have and will maintain a certificate of consent to self-insure for workers' compensation insurance, as required by Section 3700 of the California Labor Code, for the performance of the work for which this license is issued. A copy of the certificate of consent to self-insure is attached.
- ☐ I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the California Labor Code, I shall forthwith comply with those provisions or this business license may be revoked.

**NAME OF BUSINESS:**

**AUTHORIZED SIGNATURE:**

**DATE:**



## City of Rocklin

Community Development Dept.

3970 Rocklin Road

Rocklin, California 95677

Phone (916) 625-5160 FAX (916) 625-5195

## HOME BUSINESS PERMIT

**Date:** \_\_\_\_\_

**Applicant's Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Location:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_

**Business Name, if any:** \_\_\_\_\_

This permit is

1. not transferable to another location
2. not assignable to another person
3. refers only to the business for which it is issued.

I agree to notify the City, if and when

1. I abandon the business
2. I move
3. any changes in the operation of the business occur.

### **The following conditions apply to all Home Businesses:**

1. No activity which produces radio or TV interference, noise, glare, vibration or odor discernible beyond the site is allowed.
2. No use of utilities or community facilities (including trash disposal) beyond what is a normal residential use.
3. Issuance of a home business permit does not relieve the applicant from the duty and responsibility to comply with all other rules, regulations or laws governing the use of the property, including, but not limited to, the Uniform Building Code, Uniform Fire Code and any private restrictions relative to the property.
4. The business is restricted to the dwelling unit, accessory structure or garage (with the exception of a 10 x 20 foot space in the garage reserved for personal use), with no outside conduct of the business (except swimming lessons).

5. There shall be no outside storage, and no on-site storage of hazardous materials. Storage in the garage shall leave a 10 x 20 foot space available for personal, non-business use.
6. One individual employee not living in the residence is allowed to be present at the residence at any one time. Additional individuals may be employed who do not report to work at the residence.
7. No signs are allowed on or off premises, and no display for promotional purposes of products or equipment shall be visible from outside the home.
8. One commercial vehicle primarily associated with the business is allowed, not to exceed one ton. No more than three vehicles can be parked at any one time at the residence in connection with the business.
9. Clients or customers are allowed at the residence only between 7 AM and 10 PM.
10. The applicant must be the occupant of the home. If not the homeowner, written authorization from the owner (or designee) is required.

### **Cessation**

1. Upon one or more complaints, a home business can be investigated to ascertain whether the conduct violates regulations set forth in the Rocklin Municipal Code or conditions of the permit. If the determination is made that a violation exists, the permittee shall be notified in writing and given an opportunity to respond. The Director shall issue a final determination and serve a copy on the permittee and complaining parties. If a violation exists, the Director shall order that the home business cease.
2. Nothing permits the conduct of a home business in violation of the conditions of the permit, or limits the right of the City to any action for a violation, regardless of the acquiescence of the neighbors.

### **Special Conditions**

In receiving this Home Business Permit,

I acknowledge I have read the foregoing.  
 I understand the terms and conditions of the permit.  
 I agree to abide fully by all conditions recited above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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### **FOR OFFICE USE ONLY**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_



**City of Rocklin**  
**Community Development Department**  
3970 Rocklin Road  
Rocklin, California 95677  
Phone (916) 625-5160 FAX (916) 625-5195

# HOME BUSINESS APPLICATION

**Applicant's Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Location:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_

**Business Name, if any:** \_\_\_\_\_

1. Do you own or are you renting your home? ☐ own home ☐ rent home
2. *If you do not own your own home, please submit evidence the owner/designee has given you permission to use the home for the business.*
3. Describe where on the property or in what room of the house the business will be conducted. (A 10' x 20' space in a garage must be reserved for personal use, such as the parking of an automobile). Provide a floor plan, if necessary.

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4. Describe the type of business which you desire to operate in the residence, and how it will operate.

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5. Specifically list the types of machinery or equipment and materials to be used in conjunction with the home business, and where this will be located, connected, and/or stored.

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6. List other persons employed by the business not living in the home who would be reporting to work at the residence. Only one such employee is allowed at the residence at one time.

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7. Will your business involve customers or clients coming to your home?  
☐ Always      ☐ Sometimes      ☐ Never

How many customers or clients do you expect at any one time? \_\_\_\_\_

8. Will there be storage of products or materials?    ☐ Yes      ☐ No

If yes, where? Describe where on the property or within the structure, storage will occur. Include storage within a garage assuring that at least one parking space (10' x 20') is kept clear for personal use. Also, include storage that will be within a truck or other vehicle, and where that vehicle is to be kept.

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9. Will there be any commercial vehicles or trailers used in conjunction with the home business?  
☐ Yes      ☐ No

If yes, please list below the following:

License No.: \_\_\_\_\_  
Type of Vehicle: \_\_\_\_\_  
Year of Vehicle: \_\_\_\_\_  
Size of Vehicle: \_\_\_\_\_  
Gross Weight of Vehicle: \_\_\_\_\_  
Height of Vehicle: \_\_\_\_\_

Where will the vehicle be parked?

☐ Garage      ☐ Street      ☐ Yard      ☐ Driveway

10. List and describe (license no., type of vehicle, year of vehicle, size of vehicle, etc.) of all vehicles registered with the DMV for the address of the home business regardless of if they will be used for the business.

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11. How do you intend to generate business? Check each method to be used.

- |                                                    |                                                  |
|----------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Newspaper Advertising     | <input type="checkbox"/> Telephone Soliciting    |
| <input type="checkbox"/> Word of Mouth             | <input type="checkbox"/> Direct Mail Advertising |
| <input type="checkbox"/> Referral Service          | <input type="checkbox"/> Catalogs, Magazines     |
| <input type="checkbox"/> Distribution of Handbills | <input type="checkbox"/> Yellow Pages            |
| <input type="checkbox"/> Signs                     | <input type="checkbox"/> Internet                |

12. Will any CB radios or other transmitting equipment be used in conjunction with the business?

☐ Yes ☐ No

If yes, are you governed by the Federal Communications Commission? ☐ Yes ☐ No

List licensed radios or other equipment below, including call numbers.

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13. Will you do any remodeling, rewiring, plumbing, or building any additions to the residence or garage in connection with the business? ☐ Yes ☐ No

If yes, please describe below:

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14. Do you intend to use or store any flammable or combustible fluids or hazardous materials?

☐ Yes ☐ No

If yes, please list

Location: \_\_\_\_\_

Type of hazardous material (s): \_\_\_\_\_

Amount of material: \_\_\_\_\_

Fire Department approval is required for any storage of flammable or combustible materials.

Rocklin Fire Department: \_\_\_\_\_

(Signature)

(Title)

15. Have you confirmed with the Building Division and/or Fire Department that your home business does not conflict with the Uniform Building Code or Uniform Fire Code?

Uniform Building Code ☐ Yes ☐ No  
Uniform Fire Code ☐ Yes ☐ No

Please list the person contacted.

Building Division contact: \_\_\_\_\_

Fire Department contact: \_\_\_\_\_

I understand that because a business may be permitted to be conducted within my home or garage, I may be required to have the home inspected by the building inspector, fire inspector, a representative of the Community Development Department, or any other department which may have governance or an interest in the health and safety of the occupants of the surrounding homeowners.

Upon the presentation of proper credentials, I agree to any and all necessary inspections.

I understand that the Community Development Director or designee may attach specific conditions to my home business to assure that it conforms with the Rocklin Municipal Code Section 17.78 relating to home businesses.

I understand that it is my duty and obligation to comply with all other rules, regulations, ordinances, or other laws governing the use of the premises and structures thereon, including, but not limited to, the Uniform Building Code, the Uniform Fire Code, and any private restrictions relative to the property.

I hereby affirm that the information given above is correct and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_